

PTO/SB/51 (12-97)

Approved for use through 8/30/00. OMB 0851-0033

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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SUBSTITUTE REISSUE APPLICATION DECLARATION BY THE INVENTOR	Docket Number (Optional) MTS-520US1
<p>As a below named inventor, I hereby declare that My residence, post office address and citizenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number <u>5,761,301</u>, granted <u>June 2, 1998</u>, and for which a reissue patent is sought on the invention entitled <u>MARK FORMING APPARATUS, METHOD OF FORMING LASER MARK ON OPTICAL DISK, REPRODUCING APPARATUS, OPTICAL DISK AND METHOD OF PRODUCING OPTICAL DISK</u>, the specification of which</p> <p><input type="checkbox"/> is attached hereto.</p> <p><input checked="" type="checkbox"/> was filed on <u>June 2, 2000</u> as reissue application number <u>09 / 588,364</u> and was amended on _____ (If applicable)</p> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows: See Attachment:</p>	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (Optional) MTS-520US1	
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.			
Name(s)		Registration Number	
Allan Ratner		19,717	
Jacques L. Etkowicz		41,738	
Correspondence Address: Direct all communications about the application to:			
<input type="checkbox"/> Customer Number		<input type="checkbox"/>	
OR		Type Customer Number here	
Place Customer Number Bar Code Label here			
<input checked="" type="checkbox"/> Firm or Individual Name	Ratner & Prestia		
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Country			
Telephone	610-407-0700	Fax	610-407-0701
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of sole or first inventor (given name, family name) Mitsuaki Oshima			
Inventor's signature			
Residence Kyoto, Japan		Date	
Post Office Address 115-3, Minamitatsumi-cho, Katsura, Nishikyo-ku, Kyoto-shi, Kyoto 615, Japan		Citizenship Japanese	
Full name of second joint inventor (given name, family name) Yoshiho Gotoh			
Inventor's signature		Date	
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Post Office Address Room 201, 9-17, Higashinkahama 4-chome, Jyoto-ku, Osaka-shi, Osaka 536, Japan			
Full name of third joint inventor (given name, family name)			
Inventor's signature		Date	
Residence		Citizenship	
Post Office Address			
<input type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto.			

Attachment to PTO/SB/51 (12-97) Reissue Application Declaration by the Inventor

At least one error upon which reissue is based is described as follows:

During the prosecution of the application that issued as the above patent, the inventors did not recognize that the features disclosed in the patent at col. 12, lines 30-46 were appropriate to claim. As such, the inventors did not claim all that they had a right to claim. This error was made without deceptive intent. More specifically, the inventors did not claim the feature of the reflective layer being trimmed by a laser to form a barcode-like trimming pattern.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which the priority date is claimed:

Prior Foreign Application(s)

(Number)	(Country)	(Day/Month/Year Filed)
6-283415	Japan	17/November/1994
7-016153	Japan	02/February/1995
7-261247	Japan	09/October/1999